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## UNITED STATES PATENT AND TRADEMARK OFFICE

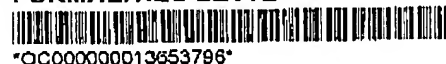
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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/821,761	01/09/2004	Sharon Ann Hayes Martin	

SHARON ANN HAYES  
11574 SEMINOLE CIRCLE  
NORTHRIDGE, CA 91326

CONFIRMATION NO. 1459

## FORMALITIES LETTER



\*0C000000013653796\*

Date Mailed: 08/26/2004

## NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

## Filing Date Granted

The U.S. Patent and Trademark Office has received your reply on 08/03/2004 to the Notice to File Missing Parts (Notice) mailed 06/28/2004 and it has been entered into the nonprovisional application. The reply, however, does not include the following items required in the Notice.

The period of reply remains as set forth in the Notice. You may, however, obtain EXTENSIONS OF TIME under the provisions of 37 CFR 1.136 (a) accompanied by the appropriate fee (37 CFR 1.17(a)).

A complete reply must be timely filed to prevent ABANDONMENT of the above-identified application. Replies should be mailed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of \$387 as a small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

## SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$387 for a Small Entity

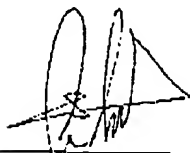
- Total additional claim fee(s) for this application is \$387
  - \$387 for 9 independent claims over 3.

Replies should be mailed to: Mail Stop Missing Parts  
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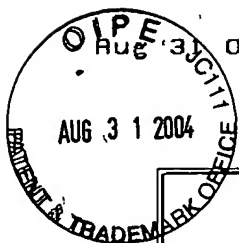


*A copy of this notice **MUST** be returned with the reply.*

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PART 2 - COPY TO BE RETURNED WITH RESPONSE



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TO: OIPE, Stop Missing Parts

Fax #: (703) 746-4060

OF: Commissioner for Patents

DATE: August 31, 2004

NUMBER OF PAGES: 4

**RE: Credit Card Payment Attached**

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